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UTILITY PATENT APPLICATION TRANSMITTAL <i>For new nonprovisional applications under 37 CFR 1.53(b)</i>		Attorney Docket No. <u>16756</u>
		First Inventor or Application Identifier <u>Ernst Ach</u>
		Title <u>Elevator System</u>
		Express Mail Label No. <u>EV 329824982 US</u>
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		MAIL STOP PATENT APPLICATION Commissioner for Patents ADDRESS TO: P. O. Box 1450 Alexandria, VA 22313-1450

1. *Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
(See 37 CFR 1.27)
3. Specification [Total Pages 12]
(preferred arrangement set forth below)
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 USC 113) [Total Sheets 3]
5. Oath or Declaration [Total Pages 2]
- Newly executed (original or copy)
 - Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
[Note Box 5 below]
- DELETION OF INVENTORS**
- Signed statement attached deleting inventor(s) named in the prior application, see CFR §§ 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP)of prior Application No. PCT/CH02/00634

Prior application information: Examiner _____

Group/Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Labelor Correspondence address below**04859**

PATENT TRADEMARK OFFICE

Name	William J. Clemens, Esq.		
Address			
City			Zip Code
Country	Telephone	734/542-0900	Fax
Name (print/type)	William J. Clemens	Registration No. (Attorney/Agent)	26,855
Signature	<i>William J. Clemens</i>		Date
			May 20, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SFND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231
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Certificate of Mailing by Express Mail

"Express Mail" Mailing Label No. EV 329824982 US Date of Deposit May 20, 2004. I hereby certify that this paper or fee is being deposited in the United States "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

*Terri L. Fox*22387 US PTO 10/849981
052004

FEE TRANSMITTAL
For FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

		Complete if known	
		Application Number	
		Filing Date	
		First Named Inventor	Ernst Ach
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	
TOTAL AMOUNT OF PAYMENT (\$ 770)		Group/Art Unit	
		Attorney Docket No.	16756

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None				3. ADDITIONAL FEES			
<input checked="" type="checkbox"/> Deposit Account:				Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)
Deposit Acct. No. 13-0005				1051	130	2051	65
Deposit				1052	50	2052	25
Acct. Name MacMillan, Sobanski, & Todd, LLC				1053	130	1053	130
The Commissioner is authorized to: (Check all that apply)				1812	2,520	1812	2,520
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments				1804	920*	1804	920*
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this action				1805	1,840*	1805	1,840*
<input type="checkbox"/> Charge fee(s) indicated below, except the filing fee, to the above-identified deposit account.				1251	110	2251	55
FEE CALCULATION							
1. BASIC FILING FEE							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1001	770	2001	385	Utility filing fee 770			
1002	340	2002	170	Design filing fee			
1003	530	2003	265	Plant filing fee			
1004	770	2004	385	Reissue filing fee			
1005	160	2005	80	Provisional filing fee			
SUBTOTAL (1) \$ 770							
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Total Claims	14	20** = 0	18/9 =	Fee from Extra Below	Fee Paid		
Independent Claims	2	3** = 0	x 86/43 =				
Multiple Dependent			x 290/145 =				
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1202	18	2202	9	Claims in excess of 20			
1201	86	2201	43	Independent claims in excess of 3			
1203	290	2203	145	Multiple dependent claim, if not paid			
1204	86	2204	43	**Reissue independent claims over original patent			
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) \$ 0							
** or number previously paid, if greater; for Reissues, see above							
Other fee (specify) _____							
*Reduced by Basic Filing Fee Paid							
SUBTOTAL (3) \$ 0							

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	William J. Clemens		
Signature	Date May 20, 2004		
	Reg. No.	26,855	
	Deposit Account User ID		

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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